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BIBDATASHEET

CONFIRMATION NO. 3836

Bib Data Sheet

SERIAL NUMBER 10/622,660	FILING OR 371(c) DATE 07/21/2003 RULE	CLASS 210	GROUP ART UNIT 1723	ATTORNEY DOCKET NO. 2018-743
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** CONTINUING DATA *****				
** FOREIGN APPLICATIONS ***** JAPAN 2002-231555 08/08/2002 JAPAN 2003-43216 02/20/2003				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/02/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY JAPAN	SHEETS DRAWING 5	TOTAL CLAIMS 11
				INDEPENDENT CLAIMS 4
ADDRESS 23117				
TITLE INJECTOR HAVING HOLES IN FILTER SECTION THEREOF				
FILING FEE RECEIVED 934	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	